

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

TICE OF SALE OF S

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Expires: May 31, 2005
Estimated average burden hours per response 16.00

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

Name of Offering check	if this is an ar	mendment an	d name has cha	anged, and inc	dicate change.)			1140	170
Private Placement of \$46,33	5,000 in Lim	ited Partners	ship Interests	of Prism Me	zzanine Fund,	L.P.		1 dJ1	112
Filing Under (Check box(es) tha	apply):	☐ Rule 504	☐ Rule 505	Rule 500	Section 4	(6)	☐ ULO	E	
Type of Filing: New Filin	g 🗷 Amen	dment							
		A. BASIC	CIDENTIFICA	ATION DATA	4				<u> </u>
1. Enter the information reque	sted about the	issuer							
Name of Issuer (check if Prism Mezzanine Fund, L.P.	this is an ame	ndment and n	ame has chang	ed, and indica	ate change.)				
Address of Executive Offices	(N	umber and St	reet, City, State	e, Zip Code)	Telephone N	umber	(Includin	g Area Code)
444 N. Michigan Avenue, S	uite 1910, Ch	icago, Illino	is 60611		(312) 464-7	900		-	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number						umber	(includin	g Area Code)
Brief Description of Business								*****	
Private equity investment fu	nd formed for	r making inv	estments in ed	quity and del	bt securities o	f com	panies.	RECD S	.E.C.
Type of Business Organization								MAH B	<u>1 200</u> 5
corporation	🔀 limite	d partnership	, already forme	ed	C -41 (-1		:e s. :		
business trust	☐ limite	d partnership	, to be formed	,	other (pleas	se speci	ity):		1.080
Actual or Estimated Date of In		_		Year 0 3		_	imated		
Jurisdiction of Incorporation o	·Organization		letter U.S. Post nada; FN for of			State:	D	Е	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington. D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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	· · · · · · · · · · · · · · · · · · ·	A, BASIC IDENTII	FICATION DATA	· · · · · · · · · · · · · · · · · · ·	
2. Enter the information r	equested for the				
 Each promoter of the 	issuer, if the issu	ier has been organized v	within the past five year	·s;	
 Each beneficial owne securities of the issuer 		er to vote or dispose, or	direct the vote or dispo	sition of, 10%	or more of a class of equity
 Each executive officer 	and director of o	corporate issuers and of o	corporate general and ma	anaging partner	s of partnership issuers; and
• Each general and man	naging partner of	f partnership issuers.			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first,	if individual)				
PMF Partners, LLC (Gen	eral Partner of F	Prism Mezzanine Fund	, L.P.)		
Business or Residence Add					
444 N. Michigan Avenue	, Suite 1910, Ch	icago, Illinois 60611			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Finkel, Robert A. (Princip	oal of PMF Parti	ners, LLC)			
Business or Residence Add			Code)		
444 N. Michigan Avenue	, Suite 1910, Ch	icago, Illinois 60611			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Mayasich, Sandra A. (Pr	incipal of PMF	Partners, LLC)			
Business or Residence Add			Code)		
444 N. Michigan Avenue	, Suite 1910, Ch	icago, Illinois 60611	*		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Crissman, Blaine A. (Pri	ncipal of PMF P	artners, LLC)			
Business or Residence Add	ress (Number an	d Street, City, State, Zip	Code)		
444 N. Michigan Avenue	, Suite 1910, Ch	icago, Illinois 60611			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Vivian, Stephen J. (Princ	ipal of PMF Par	tners, LLC)			
Business or Residence Add	lress (Number an	d Street, City, State, Zip	Code)		
444 N. Michigan Avenue	, Suite 1910, Ch	icago, Illinois 60611			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	▼ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Harlan Jr., William G.	if individual)	Alexandra Santa Caranta		, .	
Business or Residence Add	ress (Number an		Code)	· · · · · ·	
444 N. Michigan Avenue			,		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
		10	<u> </u>		
Business or Residence Add	iress (Number an	a Street, City, State, Zip	(Code)		

				B. IN	NFORMAT	TION ABO	OUT OFFE	ERING					
l Has	the issuer	sold or de	oes the issu	er intend	to sell to r	non-accred	ited invest	ors in this	offering?			Yes	No ×
17 1140		00.4, 0. 4			in Append								۳
2. Wha	at is the mi	inimum inv	estment th					_				<u>s</u> 20,	,000
												Yes	No
3. Doe	s the offer	ing permit	joint owne	ership of a	single uni	t?	***************************************	<i>-</i>				_ 🗵	
sìon to be list t	or similar e listed is a the name o	remuneration associated from the broken	ested for each for soliced person or dealer. or the in	itation of p or agent of . If more th	ourchasers in a broker of than five (5)	n connection r dealer reg persons to	on with sale gistered wi o be listed	s of securit th the SEC are associa	ies in the o and/or wi	offering. If th a state of	a person or states,		
Full Nam	ie (Last nai	me first, if	individual)			· · · · · · · · · · · · · · · · · · ·							
NOT A	PPLICAB	LE											
			s (Number	and Street	City, State	e, Zip Code							
Name of	Associate	d Broker o	r Dealer										
States in	Which Per	rson Listed	Has Solic	ited or Inte	ends to Sol	icit Purcha	asers						
(Check	c "All State	es" or chec	k individua	l States)								☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1]	0]
[IL]	[IN]	[[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	[0]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[NH]	[OK]	[OR]	[P.	-
[RI]	[SC]	[SD]	[TN] individual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P	'R]
rutt Nam	ie (Last IIai	ine msi, n	murviduai)							,			
Ducineco	or Pasidar	ana Addrag	s (Number	and Street	City State	7in Code			<u> </u>		•		
Business	Of Resider	ice Addres	s (Ivannoci	and Succi	, City, State	s, Zip Code	5)						
Name of	Associate	d Broker o	r Dealer										
Name of	Associate	d Diokei o	Dealer										
States in	Which Per	rson Listed	Has Solici	ited or Inte	ands to Sol	icit Durcha	CATC						
			individual		ilus to soi.	icit ruiciia	13013					□ All :	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]		
[(L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	-	[0]
[MT]	[NE]	[NV]	[HN]	[NJ]	[NM]	[NY]	[NC]	[ND]	[NH]	[OK]	[OR]	[P/	A]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P	'R]
Full Nam	ie (Last nai	me first, if	individual)										
Business	or Resider	nce Addres	s (Number	and Street	, City, State	e, Zip Code	e)						
Name of	Associate	d Broker o	r Dealer										
						•							
States in	Which Pe	rson Listed	Has Solic	ited or Inte	ends to Sol	icit Purcha	isers						
			c individua									☐ All S	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]		_
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [NH]	[MN] [OK]	[MS] [OR]	[M [P <i>A</i>	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[1 / [P	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none or zero." If the transaction is an "exchange offerin check this box ☐ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	٤0	<u>\$</u> 0
Equity	<u>§ 0</u>	<u>\$ 0</u>
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	<u>\$ 0</u>	<u>ç</u> 0
Partnership Interests	§46,335,000*	§ 46,335,000
Other (Specify	<u>§ 0</u>	<u>ş</u> 0
Total	<u>\$ 46,335,000*</u>	§ 46,335,000
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none or zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	40	s 46,335,000
Non-accredited Investors	0	50
Total (for filings under Rule 504 only)	N/A	§ N/A
Answer also in Appendix, Column 4. if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Tung of	Dollar Amount
Type of offering	Type of Security	Sold
Rule 505	N/A	\$N/A
Regulation A	N/A	§N/A
Rule 504	N/A	\$ <u>N/A</u>
Total	<u>N/A</u>	§ N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	X	\$0
Printing and Engraving Costs	X	§ 25,000
Legal Fees	×	§ 600,000
Accounting Fees	<u> </u>	<u>\$ 25,000</u>
Engineering Fees	X	<u>\$ 0</u>
Sales Commissions (specify finders' fees separately)	X	<u>§ 0</u>
Other Expenses (identify) Organizational and start-up fees, travel, postage general fund-raising of	expenses,.	<u>§ 100,000</u>

Total _____

\$ 750,000

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C. OFFERING PRICE, N	<u>umber of investors, expenses ai</u>	ND USE OF PROC	EEDS
b. Enter the difference between the aggregate tion 1 and total expenses furnished in respon "adjusted gross proceeds to the issuer."	se to Part C - Ouestion 4.a. This difference	is the	§ 45,585,000
5. Indicate below the amount of the adjusted used for each of the purposes shown. If the a estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set if	imount for any nurpose is not known, furn	ish an	
the adjusted gross proceeds to the issuer see.	com in response to rain a question to u	Payments to	
		Ófficers, Directors, & Affiliates	
Salaries and fees		\$\$6,986,250	<u>× \$0</u>
Purchase of real estate		x \$0	_ x \$0
Purchase, rental or leasing and installation	n of machinery and equipment	⊠ \$0	<u> </u>
Construction or leasing of plant buildings	and facilities	. № \$ ⁰	S \$0
Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this the assets or securities of another	X §0	\$37,440,375
Repayment of indebtedness		x \$0	<u> </u>
Working capital		⋉ \$0	\$1,158,375
			<u> </u>
			—
	N		5,585,000
Total Payments Listed (column totals added	d)	. <u>K</u> <u>\$4.</u>	5,383,000
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed following signature constitutes an undertaking by request of its staff, the information furnished by t	the issuer to furnish to the U.S. Securities an	d Exchange Commis	ssion, upon written re-
Issuer (Print or Type)	Signature	Dat	te
Prism Mezzanine Fund, L.P.	Jelle Home	Ma	arch_\$2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Blaine A. Crissman	Principal of PMF Partners, LLC, it	s General Partner	

---ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE						
I. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?							
See	Appendix, Column 5, for state response	onse.					
2. The undersigned issuer hereby undertakes to Form D (17 CFR 239,500) at such times as re		any state in which this notice is	filed, a notice on				
3. The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators, t	pon written request, information	furnished by the				
4. The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establish	ate in which this notice is filed and un	nderstands that the issuer claiming					
The issuer has read this notification and knows the undersigned duly authorized person.	e contents to be true and has duly c	aused this notice to be signed on	its behalf by the				
Issuer (Print or Type)	Signature	Date					
Prism Mezzanine Fund, L.P.	I Sent I		<u> </u>				
Name (Print or Type)	(Title (Print or Type)						

Principal of PMF Partners, LLC, its General Partner

Blaine A. Crissman

Instruction:
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX				
1	Intend to non-a	to sell ccredited s in State Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		X	*	0	0	0	0		Х
AK		X	*	0	0	0	0		х
AZ		X	*	0	0	0	0		х
AR		X	*	0	0	0	0		X
CA		X	*	2	\$5,000,000	0	0		X
СО		X	*	0	0	0	0		X
СТ		X	*	1	\$1,250,000	0	0		X
DE		X	*	1	\$2,000,000	0	0		X
DC		X	*	0	0	0	0		х
FL		X	*	0	0	0	0		X
GA		Х	*	1	\$100,000	0	0		X
НІ		Х	*	0	0	0	0		Х
ID		Х	*	0	0	0	0		х
IL		Х	*	30	\$30,441,360	0	0		X
IN		Х	*	1	\$1,000,000	0	0		X
IA		X	*	0	0	0	0		X
KS		Х	*	0	0 -	0	0		X
KY		X	*	0	0	0	0		X
LA		Х	*	0	0	0	0		X
ME		X	*	0	0	0	0		X
MD		Х	*	0	0	0	0		X.
МА		Х	*	o	0	0	0		X
MI		Х	*	0	0	0	0		X
MN		x	*	1	\$43,640	0	0		X
MS		X	*	0	0	0	0		X

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In addition to the investors above, one foreign investor purchased \$2,000,000 in limited partnership interests.

МО

^{*}Up to \$50,000,000 in limited partnership interests

				APF	PENDIX				
	Intend		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULO (if Yes, attach explanation of waiver granted) (Part E-Item I)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT		X	*	0	0	0	0		X
NE		X	*	0	0	0	0		Х
NV		х	*	0	0	0	0		X
NH		X	*	0	0	0	0		x
NJ		X	*	0	0	0	0		X
NM		X	*	0	0	0	0		X
NY		x	*	0	0	0	0		X
NC		x	*	0	0	0	0		X
ND		х	*	0	0	0	0		х
ОН		X	*	1	\$2,5000,000	0	0		X
ОК		X	*	0	0	0	0		X
OR		X	*	0	0	0	0		X
PA		x	*	0	0	0	0		X
RI		X	*	0	0	0	0		X
SC		X	*	0	0	0	0		X
SD		Х	*	0	0	0	0		X
TN		X	*	0	0	0	0		X
TX		Х	*	1	\$1,000,000	0	0		X
UT		x	*	0	0	0	0		X
VT		X	*	0	0	0	0		X
VA		X	*	0	0	0	0		X
WA		X	*	0	0	0	0		X
wv		х	*	0	0	0	0		X
WI		Х	*	1	\$1,000,000	0	0		X
WY		x	*	0	0	0	0		х
PR		X	*	0	0	0	0		X

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In addition to the investors above, one foreign investor purchased \$2,000,000 in limited partnership interests.